

Lanterman-Petris-Short Modernization Act Fact Sheet

Background

Established in 1967, the Lanterman-Petris-Short Act (LPS Act) governs the involuntary commitment of individuals for psychiatric treatment in California. In the 48 years since its passage, there have been significant changes in the mental health delivery system, adversely impacting a patient's ability to obtain prompt evaluation and treatment as required by current law. In addition, the fragmented and inconsistent application of the LPS Act by California's 58 counties has led to an increasing and often inappropriate dependence on hospital emergency departments to care for this population, without the necessary resources. This has resulted in individuals with mental illness languishing for hours, days and sometimes weeks, awaiting psychiatric assessment and treatment.

Bill Purpose

The purpose of this bill is to modernize sections 5150, 5151 and 5152 of the Welfare and Institutions Code or LPS Act. The LPS Act currently lacks guidance for non-LPS designated facilities involved in an involuntary hold, resulting in wide variations in the application of the law from county to county, from city to city and even from hospital to hospital. This bill makes clarifying changes to better define the various steps of a 5150 detention process to ensure consistent statewide application and to ensure that patients receive the most appropriate care in the least restrictive environment appropriate to their needs.

Bill Summary

In summary, the primary objectives of this bill are to:

- Clearly articulate when a 5150 hold starts, stops, is discontinued, and who may perform these decision-making functions;
- Increase the emphasis on the prompt provision of services in both LPS-designated and non-LPS designated facilities;
- Clarify a patient's involuntary 5150 hold status when receiving involuntary psychiatric treatment out of their county of residence, across county lines and when, admitted into a medical floor of a hospital;
- Incorporate the use of tele-health for involuntary treatment, assessment and evaluation purposes; and,
- Create optional county mental health "local or regional liaisons" to facilitate increased communication between hospitals and community services.

Co-Sponsors

California Hospital Association
California Chapter of the American College of Emergency Physicians

Opposition

None